

HEALTH MANAGEMENT ASSOCIATES

The logo consists of three vertical panels. The left panel is blue and shows a medical room with a gurney and medical equipment. The middle panel is green and shows a close-up of a classical column. The right panel is dark red and shows a modern interior with a large window and a person's arm.

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5/6/2014

Creating an Integrated Approach to the Care of Vulnerable Populations: Report to the Fairfax County Board of Supervisors

HealthManagement.com

How Did HMA Approach the Development of a Work Plan?

- Reviewed all previous reports and consensus documents.
- Interviewed over 100 individuals (County staff, community health and social service providers, involved citizens, state officials, etc.).
- Drew from lessons in other communities.
- Met often with County Human Services leadership to assure potential for implementation.

What Goals Were We Trying to Achieve?

- Achieve the best possible use of Fairfax County health dollars to assure the health of the community.
- Build transparent and equitable partnerships with community providers to share the responsibility.
- Maximize the potential for the “health care safety net” to be financially sustainable.
- Assure a seamless experience for those seeking County health care services.

What Functions Need to Be Addressed to Achieve These Goals?

- Establish an engaged County-wide network of health providers to assure duplication of service is eliminated and gaps are filled: that care is accessed at the right place and at the right time. The primary targets for this network should be the uninsured and Medicaid populations, although this population could be expanded as access problems are identified.
- Commit to an organizational structure within the County's Human Services System to integrate the efforts of all programs and services directly related to patient care to assure efficiency and effectiveness.

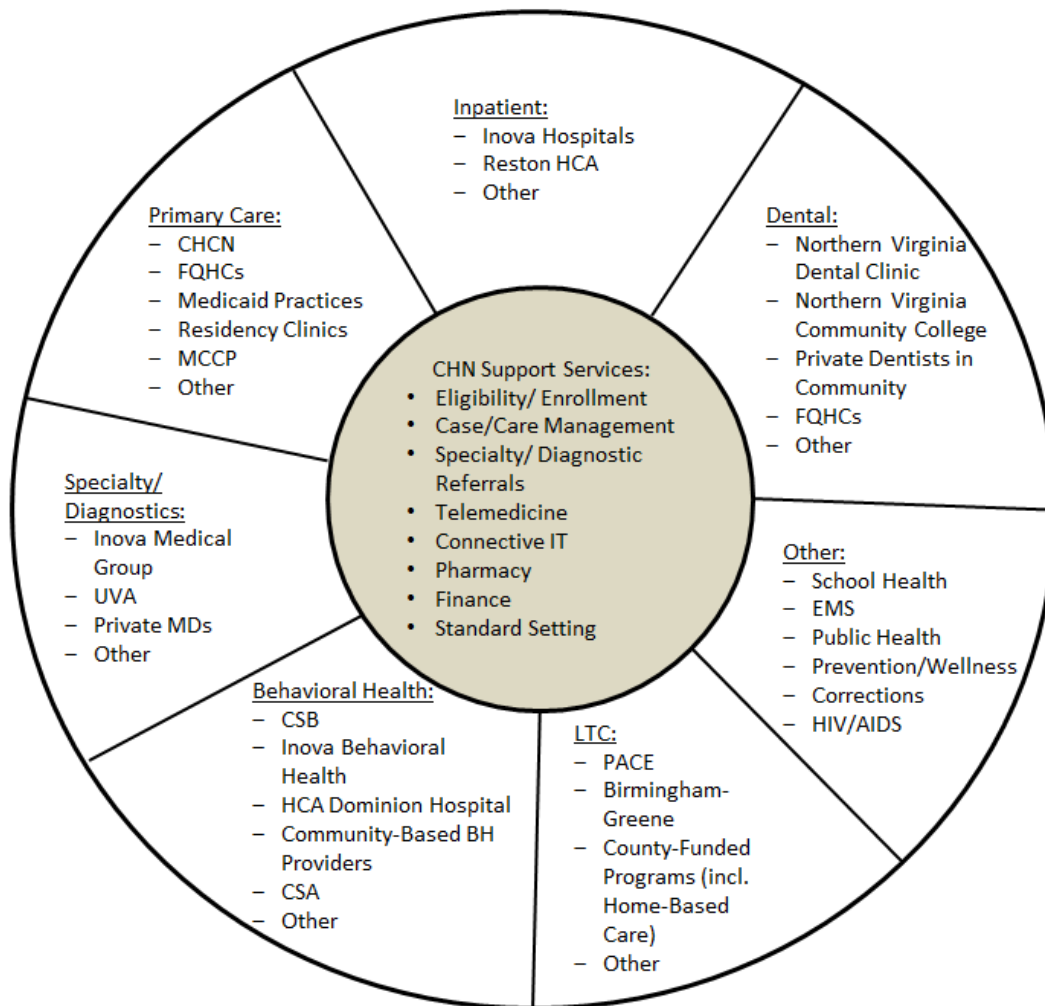
What Functions, cont'd?

- Adopt and implement a plan and timeline for unified data and information sharing (both within the County and through the community network) to assure the effectiveness of service delivery.
- Prioritize the streamlining of enrollment and eligibility screening and processing within the County to assure those seeking services are linked to appropriate care as soon as possible.
- Ensure that all efforts are made to maximize financial opportunities to achieve maximum sustainability.
- Organize citizen input into an even more effective force that focuses system-wide, not only on specific parts of the system.

Specific Actions: Community-Wide Health Network

- The County should develop the outline of a set of services (medical, behavioral health and support) needed by the target population (Medicaid, uninsured to start).
- Current provider contributions to that service mix, as well as likely roles of individual providers, should be proposed.
- A small group of critical providers should be assembled to build upon this first outline and further develop into a plan.

Figure 1. Community Health Network (CHN)



Community-Wide Health Network, cont'd

- Areas of duplication and needed access should be identified, with providers “assigned” based upon existing investment and institutional interest.
- Infrastructure needs (i.e., care management, connective IT) should be determined/ prioritized.
- A financial model should be determined, built upon best possible leveraging opportunities.
- An accountable and transparent organizational structure should be agreed upon.
- Initial steps should be completed in six months.

Specific Actions: Internal County Organization of Health Care Delivery

- Redesign reporting structure so that all direct health care delivery (programs, services and contracts) is developed, implemented and evaluated as an integrated system.
- Coordinate and elevate all enrollment, eligibility and screening programs currently in various agencies.

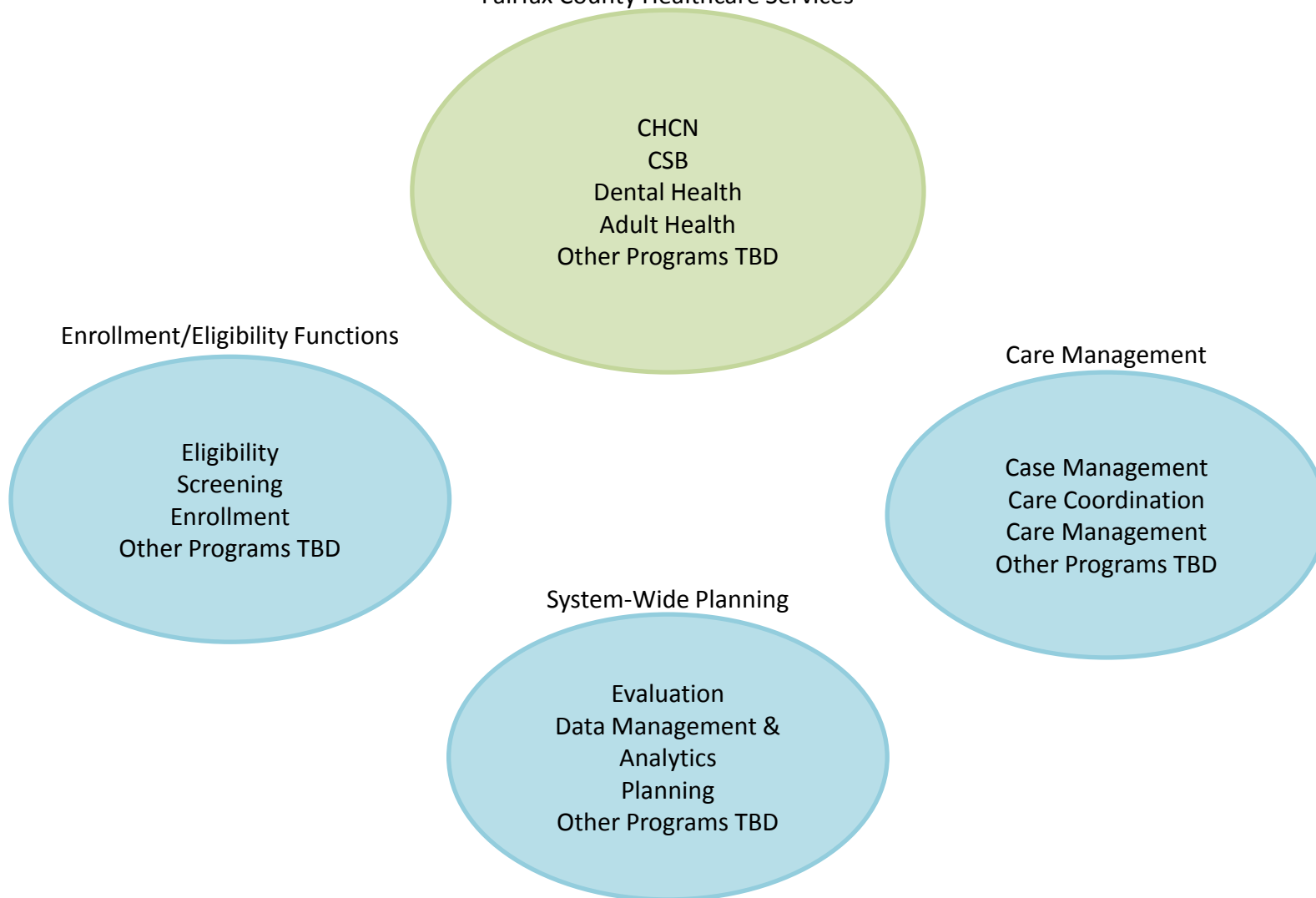
Internal Organization, cont'd

- Identify individuals to be IT and Finance leads for the system to maximize opportunities and coordination.
- Move all current planning and evaluation efforts into one consolidated system-wide function.
- Identify and coordinate all current case management, case coordination and care management functions throughout the system.

Internal Organization, cont'd

- Consider the further consolidation of Departments within the Human Services System.
- Assess and implement the most effective approaches to strengthening citizen input into system-wide health care delivery.
- Work with other County units to further strengthen health enhancement (e.g., corrections, fire, schools).

Fairfax County Healthcare Services



Specific Actions: Information Technology

- Secure a single eligibility and enrollment system for County health (and potentially human service) programs.
- Agree — with other providers collaborating in the community network — on an approach to information sharing and transfer.
- Invest — as a multi-provider network — in software that could reduce the need for specialty in-person consults.
- Continue to build a health department EHR.

IT, cont'd

- Acquire — either as a County or through the community network — a care management tool, utilizing select health information exchange (HIE) services.
- Establish electronic health record (EHR) interfaces for providers participating in the community network.
- Establish a data analytics functions within the Human Services System.
- Implement major efforts for information management across (1) the community-wide safety net and (2) county Human Services programs.
- Sequence IT initiatives to support delivery system initiatives.

Specific Actions: Finance

HMA recommendations that require State cooperation:

- Claim federal match on screening efforts.
- Utilize County dollars to increase managed care rates (through intergovernmental transfers).
- Explore nursing home upper payment limit opportunity.
- Apply for a Home and Community Based Services (HCBS) waiver.
- Evaluate additional reimbursement for adult day care.
- Explore potential reimbursement for school health services.
- Look at potential collaboration with the State on Medicaid coverage of housing bonuses.

Finance, cont'd

HMA recommendations that don't require State cooperation:

- Explore transferring some services currently delivered by the County to others who can more effectively provide services;
- Establish County finance with high level Medicaid expertise;
- Maximize all available federal funding;
- Implement recommendations in previous reports related to financial performance;
- Consolidate the oversight and management of County pharmacies;
- Consider extending current CHCN contract, explore conversion to FQHC look-alike (through community-wide process).

TimeLine

- Health care environment is rapidly changing, posing both new challenges and opportunities.
- Counties across the country are playing a pivotal role in developing effective delivery systems — there will always be vulnerable populations.
- External efforts should commence immediately (6 months to an initial network).
- Internal reorganization should start now but will likely take more time (1 year-18 months).
- Finance and IT opportunities should be explored immediately.

Conclusion

- Fairfax County has historic commitment to assuring care for vulnerable populations; has moved to coordination but not functioning as a fully integrated system.
- High quality programs should be built upon to leverage and coordinate a seamless system of care, built on what all participants do best.
- Individual providers, taxpayers and, most of all, those needing care will benefit.